

THIS FORM IS FOR INTERNAL PTO USE ONLY.  
It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 64/632 748

### Total Fee Calculation

	Fee Code	Fee Amount	Number of Claims	Fee Rate	Fee Amount	Fee Amount	Total
Basic Filing Fee	1000				640		
Total Claims Fee	1000	32	12		24		
Information Disclosure Fee	1000	9	6		468		
Model Dependent Fee	1000				130		
Search Fee	1000						
English Translation	1000						
<u>TOTAL FEE CALCULATION</u>							<u>1504</u>

Fees due upon filing (see application)

Total Filing Fees Due = \$ 1504

Less Filing Fees Substantiated = \$ 1

BALANCE DUE = \$ 1504

Office of Initial Patent Examination

Figure 7